PTC/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application by Dockes Number		
CLÁIMS AS FILED — PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED			R FILED	NUMBER EXTRA			RATE	FEE		RATE	FEE
	C FEE CFR 1.16(a))							5	OR		s
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20	us 20 = •			x 5 =		OR	x s =	
INDE	PENDENT CLAIN FR 1.16(b))	rs .	minus 3 a		•		x \$ =		OR	x s_ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))											
						J	+ 5 =		OR:	+5=	<u> </u>
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	L
CLAIMS AS AMENDED - PART II											
	(Column 1) (Column 2) (Column 3)					SMALL 6	NTITY	OR		R THAN ENTITY	
A	14 /	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT		RATE	ADDI-		RATE	ADDI-
ENA	10/21/05	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		WAIL	TIONAL		TOTAL	TIONAL FEE
ME	Total (37 CFR 1.16(c))	.27	Minus	20	- 7		xs =		OR	× 5 0-	357
ENDM	Independent (37 CFR 1.16(b))	. 7	Minus	3	- 2	l	x \$ =		OR	× = 200	400
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								OR		/
						1	TOTAL			TOTAL	750
12.	17 0-	RCE					ADD'L FEE		OR	ADD'L FEE	الح ما
	27.05	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)				1 4		
T 8		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE '	ADDI- TIONAL
ΨΨ	Total	AMENDMENT	Minus	PAID FOR				FEE			FEE
ğ	(37 CFR 1.16(c)) Independent	33	Minus	<i>" 28</i>	5		x \$=		OR	x <u>\$ 50</u> =	250
AMENDMENT	(37 CFR 1.16(b))	7	Marius	-7			x s=		OR	x s=	
₹	FIRST PRESENT	ESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	250
(Column 1) (Column 2) (Column 3)											Pd.
0		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	1	RATE	ADDI-		RATE	ADDI-
		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE		MIL	TIONAL FEE
ME	Total (37 CFR 1.16(c))	AMENDMENT	Minus	**			x s=			x s =	
8	Independent (37 CFR 1.15(b))	•	Minus	***	n				OR		-
AMENDMENT	FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								OR	x \$=	
H	PROST PRESENTATION OF MULTIPLE DEPENDENT COMM (37 CPR 1.10(0))					I	+s_ =		OR	TOTAL	
	• If the entry in r	olumn 1 je lose ih:	in the entai	in column 2 writ	e 70° in column	3	ADD'L FEE	L	OR	ADD'L FEE	L
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.